D 4 = / /										
RCE 1/10/0.										
Application or Docket Number										
09/339869										
MALL I	ENTITY	OF	OTHE	R THAN ENTITY						
RATE	FEE	7	RATE	FEE	1					
ASIC FE	E 395	OF	BASIC FEE	790						
125		OR		•						
15	2	OR	XXXO							
180		OR	+36₽							
OTAL		OR	TOTAL							
OTHER THAN SMALL ENTITY										
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
25		OR	X50							
100		OR	X 200							
180		OR	+340							
TOTAL IT. FEE		ОЯ	TOTAL ADDIT. FEE							
		. · ·		•	··					
RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	•					
25		OR	X50							
100		OR	X 200							
180	50		x360	79						
TOTAL IT. FEE		OR	TOTAL ADDIT. FEE							
ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE						
		1								

								- 1	Applicatio	u ori	OCKELINUI	noer
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003									.09	[3	398	69
CLAIMS AS FILED - PART I (Column 1) (Column 2)					ımn 2)		SMALL TYPE	ENTITY	OR	OTHE	R THAN ENTITY	
TOTAL CLAIMS]	RATE	FEE	٦ .	RATE	FEE
F	FOR		NUMBER FILED		NUME	UMBER EXTRA		<u> </u>	EE 395	-1	BASIC FEE	<u> </u>
				HOME	HORIBEITEATIA		5.70		104		1790	
-	TOTAL CHARGEABLE CLAIMS		15 minus 20=		•			X25		OR	X50	
INDEPENDENT CLAIMS			3 minus 3 = -			XIST		10	OR	XXXO		
М	ULTIPLE DEPE	NDENT CLAIM P	RESENT				+ 180		OR			
• [f the difference	e in column 1 is	less than z	ero, enter	"0" in c	olumn 2	.			-	<u> </u>	
	TOTAL OR TOTAL										THAN	
		(Column 1)	KINICIADEE	(Colum		(Column 3)	OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MO	Total	• .	Minus	**		=	1	X123	1	OR	X50	
N N N	Independent _.	*	Minus	***	• •	= .	1 1	*		1	X200	-
₹	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM			x700		OR	A-200.	
			. :			* : . : . :		+181)	OR	+340	
			•					TOTA		ОЯ	TOTAL ADDIT. FEE	
. :		(Column 1)		(Colum	n 2)	(Column. 3)	. · · · · ·					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NO.	Total '	•	Minus	**		=	lſ	X25		OR	X50	* * *,
MEN	Independent	•	Minus	***		=	ı r		 	1 1		
۷	FIRST PRESE	NTATION OF MU	JLTIPLE DEP	ENDENT	CLAIM		ΙГ	X100	`	OH	X 20-0	
	-	•					Ŀ	4180	<u> </u>	OR	X360	7
		•	•				A	TOTA DDIT. FEI		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n 2)	(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUMB PREVIOL PAID F	ER : USLY	PRESENT EXTRA	I	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Ž Q	Total	•	Minus	44 .		=		X25		OR	X 50	
AME	Indep ndent	*	Minus	***		=		× 100		.	X/200	٠,
-	FIRST PRESE	NTATION OF ML	JLTIPLE DEP	ENDENT (CLAIM		· • •		I			

4180

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^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.